

## EXHIBIT A

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

MMB Docket No. 1671-0172

J &amp; J Reference: DEP 538

Application of: Maroney

Allowed: June 6, 2003

Serial No. 09/767,487

Group Art Unit: 3743

Filed: January 23, 2001

Examiner: K. Ferko

For: **Method and Apparatus for Resecting a Greater Tubercle from a Humerus of a Patient During Performance of a Shoulder Replacement Procedure**

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on August 22, 2003  
(Date of Deposit)

Paul J. Maginot

Name of person mailing Document or Fee

  
Signature of person mailing Document or FeeAugust 22, 2003

Date of Signature

**LETTER**

Mail Stop Issue Fee  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**FAX RECEIVED****OCT 01 2003****PETITIONS OFFICE**

Sir:

Enclosed please find a completed Issue Fee Transmittal in connection with the above-identified patent application. Our check for \$1,600.00 is enclosed to cover the cost of the issue fee (\$1,300.00) and the cost of the publication fee (\$300.00).

DOCKETED  
*spalash*

Commissioner for Patents.

Issue Fee Transmittal

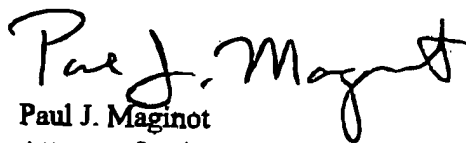
August 22, 2003

Page 2 of 2

Please charge any fee deficiency or credit any overpayment to Deposit Account  
No. 13-0014.

Respectfully submitted,

MAGINOT, MOORE & BOWMAN



Paul J. Maginot

Attorney for Applicant

Registration No. 34,984

August 22, 2003

Maginot, Moore & Bowman

Bank One Center/Tower

111 Monument Circle, Suite 3000

Indianapolis, Indiana 46204-5115

(317) 638-2922 telephone

(317) 638-2139 facsimile

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE  
 Commissioner for Patents  
 Alexandria, Virginia 22313-1450  
**Fax** (703)746-4000

**INSTRUCTIONS:** This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

**CURRENT CORRESPONDENCE ADDRESS** (Note: Legibly mark-up with any corrections or use Block 1)

7590

06/06/2003

Paul J. Maginot  
 Maginot, Addison & Moore  
 Bank One Center/Tower  
 111 Monument Circle, Suite 3000  
 Indianapolis, IN 46204-5130

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Paul J. Maginot

(Depositor's name)

Paul J. Maginot

(Signature)

August 22, 2003

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/767,487	01/23/2001	Brian J. Maroney	1671-0772	3262

**TITLE OF INVENTION:** METHOD AND APPARATUS FOR RESECTING A GREATER TUBERCLE FROM A HUMERUS OF A PATIENT DURING PERFORMANCE OF A SHOULDER REPLACEMENT PROCEDURE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1300	\$300	\$1600	09/08/2003

EXAMINER	ART UNIT	CLASS-SUBCLASS
PERKO, KATHRYN P	3743	606-086000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) Maginot, Moore & Bowman the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

DePuy Orthopaedics, Inc.

Warsaw, IN

Please check the appropriate assignee category or categories (will not be printed on the patent)

☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

☒ Issue Fee☒ A check in the amount of the fee(s) is enclosed.☒ Publication Fee☐ Payment by credit card. Form PTO-2038 is attached.☐ Advance Order - # of Copies☒ The Commissioner is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 13-0014 (enclose an extra copy of this form).

Commissioner for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

(Date)

Paul J. Maginot

August 22, 2003

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMIT THIS FORM WITH FEE(S)

August 22, 2003

**PLEASE RETURN THIS CARD**

**Payment of Issue Fee for Patent Application for: Method and Apparatus for Resecting a Greater Tubercle from a Humerus of a Patient During Performance of a Shoulder Replacement Procedure**

Includes:

- ☒ Transmittal Letter
- ☒ PTOL-85B form - Part B - Issue Fee Transmittal including Certificate of Mailing
- ☒ Check for \$1,600.00

Serial No. 09/767,487

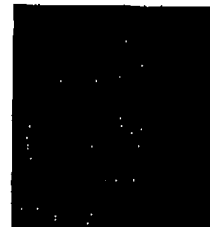
Filed: January 23, 2001

Inventor(s): Maroney

J & J Reference No. DEP 538

MMB Docket No. 1671-0172

Maginot, Moore & Bowman  
Bank One Center/Tower  
111 Monument Circle Suite 3000  
Indianapolis, Indiana 46204-5115



Carlsbad Caverns National Park, NM

## CHECK REQUEST

Case No.:

1671 7172

Make Check to:

Commissioner

Other (specify)

Patents

Check Amount:

1600

Reason:

issue fee

Date Requested:

8-22-03

Requestor:

VZ

Time Slip Number:

71918

CHECK TOTAL \*\*\*\*\*\$1,600.00

MAGINOT MOORE &amp; BOWMAN LLP

BANK ONE CENTER TOWER  
111 MONUMENT CIRCLE SUITE 300  
INDIANAPOLIS IN 46204-4930BANK ONE  
BANK ONE  
BANK ONE

00007516

ONE THOUSAND SIX HUNDRED AND XX / 100 Dollars

AMOUNT

08/22/03

\*\*\*\*\*\$1,600.00

Commissioner

of Patents and Trademarks

1671-0172

Pat J. Maginot

⑈007516⑈ ⑈074000010⑈ 616730099⑈

SECURITY FEATURES: MICRO PRINT TOP &amp; BOTTOM BORDERS COLORED PATTERN - ARTIFICIAL WATERMARK ON REVERSE SIDE - MIBING FEATURE INDICATES A COPY

7516

VENDOR ID: C OF P & T  
PAYEE: CommissionerCHECK NO: 00007516  
MEMO: 1671-0172

DATE: 08/22/03

ACCOUNT

AMOUNT

6390 Filing Fees Reimbursable

1,600.00

CHECK TOTAL \*\*\*\*\*\$1,600.00

MAGINOT MOORE &amp; BOWMAN LLP